IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PPLICANT:

SOHOCKI, M., ET. AL.

§ **EXAMINER:**

09/765,061

§ **GROUP ART UNIT:**

January 17, 2001

DOCKET: 25630/16UTI

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§

FOR: Mutations in a Novel Photoreceptor- Pineal

Gene on 17p Cause Leber Congenital

Amaurosis (LCA4)

EM 031 559 228 US

10 September 2007

Date of Deposit

I hereby certify that this Application and the documents referred to as enclosed therein are being deposited with the Solvice in an envelope as "Express Mail Post Office to Addressee," addressed to:

Commissioner for Patents

CERTIFICATION UNDER 37 C.F.R. § 1.10

MS AF/DAC P.O. Box 1450, Alexandria, VA 22313-1450

10 September 2007 Date of Signature

DECLARATION WITH POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Mutations in a Novel Photoreceptor-Pineal Gene on 17p Cause Leber Congenital Amaurosis (LCA4)

the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. § 1.56(a).

I hereby do not claim foreign priority benefits under 35 U.S.C. § 119.

I hereby do not claim domestic priority benefits under 35 U.S.C. § 120.

I hereby claim provisional application priority benefits under 35 U.S.C. §119 (e) of any provisional application(s) under 35 U.S.C. §111(b) listed below:

PRIORITY PROVISIONAL APPLICATION(S)

		Priority Claimed
EL 389 348 319 US		(X)Yes ()No
(Provisional Number)	(Day/Mo./Yr.)	
		()Yes ()No
(Provisional Number)	(Day/Mo./Yr.)	

POWER OF ATTORNEY

I hereby revoke any previous Powers of Attorney and appoint Robert W. Strozier, Registration No. 34,024 an attorney with the law firm of ROBERT W. STROZIER, P.L.L.C., 2925 Briarpark Dr, Suite 930, Houston, Texas 77042, Customer Number 23873, as its attorney with full power of substitution and revocation, to prosecute the application, to make alterations and amendments therein, to transact all business in the Patent and Trademark Office in connection therewith and to receive the Letters Patent.

I hereby direct that all correspondence and telephone calls be addressed to:

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I hereby declare that all statements made of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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